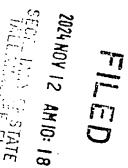
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	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:





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COVER LETTER

TO: New Filing Division of	Section Corporations			
SUBJECT:	Lynx K	Pecruiting Se	rusees LL	C
	(Name of	Resulting Plories Limited	I Company)	· · · · · · · · · · · · · · · · · · ·
The enclosed Articl Business Entity" in	es of Conversion, Ar to a "Florida Limited	ticles of Organization Liability Company"	n, and fees are sub- in accordance with	mitted to convert an "Other h s. 605.1045, F.S.
Please return all cor	respondence concert	ing this matter to:		
F	Yank Wal	ker		
li	10x Necrvith (Firm/Company) 0x 69	ker ing Services,	uc	2024 NOV 12 SECRETARY
	(Address)	34219		ILED 112 AMIO: I
E-mail Address: (to b	Arrish for City: State and Zip Code City: State and Zip Code Calliance to ce used for future annual	m. net report notifications)		O: 18
For further information				
(Name of Contact	Walker Person)	at (<u>605</u>) (Area Code) (759-36/ Daytime Telephone ?	Number)
Enclosed is a check for dollars and drawn on a	or the following amo a bank located in the	ount: (All checks pro-	cessed by this offi	ce must be payable in US
(\$25 for Conversion	O\$155.00 Filing Fees and Certificate of Status	S180.00 Filing Fed and Certified Copy	Certified Copy Certificate of S	, and
Mailing Addres New Filing Sect			reet Address: w Filing Section	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

NHS11 (7/17)

P.O. Box 6327

Tallahassee, FL 32314

Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company



Articles of Conversion and attached Articles of Organization are submitted to convert the follower Business Entity" into a Florida Limited Liability Company in accordance with \$.605.1045 ares.

The name of the "Other Business Entity" immediately prior to the filing of the Articles of Convers LYAX Recourting Services LLC (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
he "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or busines
organized, formed or incorporated under the laws of Jouth Dakota (Enter state, or if a non-U.S. entity, the name of the cou
(Enter state, or if a non-U.S, entity, the name of the cou
Jal 1 200) late of organization, formation or incorporation)
ne name of the Florida Limited Liability Company as set forth in the attached Articles of Orga.
Lyn Recruiting Services LCC (Enter Name of Plorida Limited Liability Company)
-
iot effective on the date of filing, enter the effective date: Affective date: Cannot be prior to date of receipt or filed date for more than 90 calendar.
effective date: Cannot be prior to date of receipt or filed date for more than 90 calendar (te this document is filed by the Florida Department of State.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lint's effective date on the Department of State's records.

'Converted or Other Business Entity' has agreed to pay any members having appraisal rights the h such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

plan of conversion has been approved in accordance with all applicable statutes.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nn The name of the L		ompany is:				
Ly	1x Recruit	ng Service	s Lic	, u(1 /2 u)		
ARTICLE II - Ac The mailing addres	ldress:		•	•	iability Comr	anv is:
Principal Office A	Address:	<u>Ma</u>	iling Addres		,	
	Hage Hill AV	<u> </u>	BOX 6			
ARTICLE III - Re	egistered Agent, I	Registered Offices	ce. & Registe	ercd Agent'	e Sianatan	
business entity with an a	Florida street addre	ss of the registe	red agent are:	•		
		ank walk Name	er		SECRETARY OF STATE TALLAHASSEE, FL	
	Florida street add	Cottoge Hi Iress (P.O. Box	NOT accepta	ible)	AH 10	
-	ParrioL	F.	L FL Zip	34219	: 18	
Having been name		ent and to accep			he above stat	ed limite

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGRM	LOSi Walker 4235 Co Hoge Mil Are Parrish for 34219
(Use attachment if necessary)	SECHCIA
LE V: Other provisions, if any.	WAS SEE
REQUIRED SIGNATURE:	110: 18 STATE
This document is executed in accordance wany false information submitted in a document	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ent to the Department of State constitutes a third degree felor walls. Walls ed or printed name of signee